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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

LOSS UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: August 31, 1998 Estimated average burden hours per response ... 16.00

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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Convertible Note Due September 1, 1006 **F** Rule 506 Filing Under (Check box(es) that apply): ☐ Rule 504 Rule 505 New Filing Type of Filing: ☐ Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer (check if this is an amendment and name has changed, and indicate change.) FastShip. Inc. (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Address of Executive Offices 123 Chestnut Street (215) 574-1770 Philadelphia, PA 19106 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Commercial cargo vessel design and operation. Type of Business Organization ☐ limited partnership, already formed Corporation other (please specify): D business trust ☐ limited partnership, to be formed Year Month ☐ Estimated ☐ Actual Actual or Estimated Date of Incorporation or Organization:

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Hotential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid CML control number. SEC 1972 (2-97) 1 of 8



A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Pederson, Einar					
Business or Residence Addre	SS (Number a	and Street, City, State, 2	Lip Code)		
123 Chestnut Street,	Suite 204, F	hiladelphia, PA 191	06	•	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	EX Executive Officer	2 Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Bullard II, Roland K.	• • •				·
Business or Residence Addre	ess (Number a	ind Street, City, State, 2	Lip Code)		
123 Chestnut Street,	Suite 204,	Philadelphia, PA 19	106		*
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	© General and/or Managing Partner
Full Name (Last name first,	if individual)				
Chambers, Kathryn Rie	pe				
Business or Residence Addr	ess (Number:	and Street, City, State, 2	Zip Code)		,
123 Chestnut Street	t, Suite 204,	Philadelphia, PA	. 19106		
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☑ Director	☐ Ceneral and/or Managing Partner
Full Name (Last name first,	, if individual)	•.			
Giles, David L.			•		·
Business or Residence Addr 123 Chestnut Street,	; *		-	4.0000	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	다 Director	General and/or Managing Partner
Full Name (Last name first Colgan, Dennis	, if individual)				**************************************
Business or Residence Addi	ess (Number	and Street, City, State,	Zip Code)		
123 Chestnut Street,	Suite 204,	Philadelphia, PA 19	106		
	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partne
Check Box(es) that Apply:					
	, if individual)	. •	*		
	•	ion	*		
Full Name (Last name first Riverfront Developm Business or Residence Add	ent Corporat	and Street, City, State,	Zip Code)		
Full Name (Last name first Riverfront Developm	ent Corporat	and Street, City, State,	Zip Code)		
Full Name (Last name first Riverfront Developm Business or Residence Add	ent Corporat ress (Number Glouchester	and Street, City, State, City, NJ 08030	Zip Code) □ Executive Officer	☐ Director	☐ General and/or Managing Partne
Business of Residence Add 701 North Broadway,	ent Corporat ress (Number Glouchester	and Street, City, State, City, NJ 08030		☐ Director	☐ General and/or Managing Partne

' l. Has th	ne issuer so	ld, or doe	s the issue	r intend to	sell, to p	on-accredi	ited investo	ers in this	offering?.		•••••	Yes No
			Ansv	ver also in	Appendix	, Column	2, if filing	under UL	OE.			~=
2. What	is the mini	mum inve	stment tha	t will be a	eccepted fr	om any in	dividual? .			•••••		\$10,000
						_						Yes No
	the offering											
sion 0 to be list th	the informant similar realisted is an end of the name of the left, you make the left, you make the left, you make the left.	nuneration associated the broker	a for solici person or or dealer.	tation of p agent of a If more t	urchasers i a broker or han five (5	n connecti r dealer re) persons	on with sal gistered wi to be listed	es of securi th the SEC	ties in the	offering. I ith a state	f a person	
Full Name	(Last name	first, if i	ndividual)									•
N/A							•				-	
Business or	Residence	Address (Number a	nd Street.	City, Stat	e, Zip Co	de)		· · · · · · · · · · · · · · · · · · ·			
			,-	•		• •						
Name of A	ssociated F	Broker or 1	Dealer				·		······	· · · · · · · · · · · · · · · · · · ·		
States in V	Jhich Beer	n listed I	Jac Salici	ed or inte	nds to Sol	icit Durch	30400					
	'Ali States'					•						M All C
•						•						All States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
•	[SC]	[SD]	[TN]	[XX]	[UT]	[VT]	[AV]	[WA]	[WV]	[MI].	[WY]	[PR]
Full Name N/A Business o					, City, Sta	te, Zip Co	ode) ·				··	
r,								٠			•	
Name of	Associated	Broker or	Dealer				,					
States in	Which Pers	on Listed	Has Solic	ited or Int	ends to Sc	licit Purcl	nasers					
(Check	"All States	s" or chec	k individu	al States)								☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[NI]	[[A]	[KS]	[KY]	[LA]	[ME]	(MD)	[MA]	[M1]	[MN] [OK]	(MS) [OR]	[MO] [PA]
[MT]	[NE] [SC]	[VV] [SD]	[HH] [HT]	[[[[K]]	[MM] [TU]	[YY]	(NC) [VA]	[MD]	(OH)	[M1]	[WY]	[PR]
	e (Last nar											
N/A												
	or Residence	e Address	Number	and Stree	t. City. St	ate. Zip C	ode)	<u></u>				
Devices			(1 (51115)	<u> </u>		,p						•
Name of	Associated	Broker o	r Dealer			•						
States in	Which Per	son Listed	l Has Soli	cited or In	itends to S	olicit Pur	chasers	,				
(Check	"All State	≈" or che	ck individ	ual States)			*****					All States
[AL]	[AK]	[AZ]	[AR]	[CA]		[CT]		[DC]	[FL]	[GA]	[HI]	4-4-0
[IL]	[IN]	[IA]	[KS]	[KY]	-				[MI]			
[MT] [RI]	[NE]	[NV]	(HM)	[[[K]]	(NM)	-			(OH)	(OK)		

B'INFORMATION ABOUT OFFERING

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	<u>\$ · </u>	_ \$
	□ Common □ Preferred	:	
	Convertible Securities (including warrants)	\$100,000	\$ 100,000
	Partnership Interests	\$	_ \$
	Other (Specify)	\$	_ \$
	Total	\$100,000	<u>\$100,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors		<u>\$ 100,000</u>
	Non-accredited Investors	o	<u> </u>
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Time of	Dollar Amount
	Type of offering	Type of Security	Sold
	Rule 505		_ \$
	Regulation A	. ·	_ S
	Rule 504	<u></u>	<u> </u>
	Total		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		O \$
	Printing and Engraving Costs		O \$
	Legal Fees		S 1,000
	Accounting Fees	••••	O \$
	Engineering Fees		O \$
	Sales Commissions (specify finders' fees separately)		O \$
	Other Expenses (identify)		D S
	Total		\$1,000

	C OFFERING FREE, NUMBER	OF INVESTORS, EXPENSES AND	USE OF PROCE	EDS
	b. Enter the difference between the aggregate offer tion 1 and total expenses furnished in response to 1 "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This difference	is the	99,000 s
5.	Indicate below the amount of the adjusted gross prused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate the adjusted gross proceeds to the issuer set forth	nt for any purpose is not known, furni The total of the payments listed must	sh an equal	
			Payments t	
			Officers, Directors.	
			Affiliates	
	Salaries and fees		ಶು s	П «
	Purchase of real estate	•••••		
	Purchase, rental or leasing and installation of i	machinery and equipment	□ S	D \$
	Construction or leasing of plant buildings and	facilities	□ \$	
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	assets or securities of another		
	Repayment of indebtedness		Ø \$	🗆 \$
	Working capital	· · · · · · · · · · · · · · · · · · ·	□ \$	5 99,000
	Other (specify):		. 🗆 S	□ S
			•	
		· · · · ·	. 🗆 s	D \$
	Column Totals		^	
	Total Payments Listed (column totals added)		. 23 5	99,000
_		D. FEDERAL SIGNATURE		
fo	The issuer has duly caused this notice to be signed by ollowing signature constitutes an undertaking by the juest of its staff, the information furnished by the is	issuer to furnish to the U.S. Securities:	and Exchange Cor	nmission, upon written re-
Ŀ	ssuer (Print or Type)	Signature	,	Date
	FastShip, Inc.	Kolling Knepe Cha	Ser	9/5/03
7	Name of Signer (Print or Type)	Title of Signer (Print or Type)		
	Kathryn Riepe Chambers	Executive Vice President		
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-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?	

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
FastShip, Inc.	Dhy headaly	9/5/03
Name (Print or Type)	Title (Print or Type)	
Kathryn Riepe Chambers	Executive Vice President	

Instructions

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	1	2	3		· · · · · · · · · · · · · · · · · · ·	4					
	to non-a investors	to sell ceredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item!)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yజ	70		
AL						·					
AK		·			٠						
AZ						·					
AR											
CA					.*						
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A CONTRACTOR OF THE SECOND CONTRACTOR OF THE S	Intend to non-a investors (Part B	ccredited in State	Type of security and aggregate offering price offered in state (Part C-Item1)	Type of investor and amount purchased in State (Part C-Item 2)					fication te ULOE attach tion of granted) -Item1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	¥es	No
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NE			•						
NV					-				
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